

**County of San Diego
Motion Picture Filming Permit Application**

Film Company Name: _____ Today's Date _____
Filming Date(s): _____
Contact Person: _____ Phone # (Office) _____
Billing Address: _____ Phone # (Local) _____

Type of Production: (Film) (Television) Still Photo) (Commercial)
Project Title: _____
Production Location: _____

Site Contact: _____ Phone # _____

DMPR Contact:

Services Requested

Sheriff's Department

(Single Location) (Moving Conveyance) (Extras) Traffic Control
(Crowd Control) (Marked Units) (Other _____)

Recommended Staffing: Deputies _____ Vehicles _____ Motorcycles _____

Recommended Staffing: _____

Dates/Hours of Service: _____ From: _____ To: _____
From: _____ To: _____

Special Instructions: _____

Deputy/Sergeant in Charge: _____ **Unit:** _____

Facilities/Parks

Building or Park to be Used _____

Specific Area to be Used _____

Dates/Hours of Use: _____ From: _____ To: _____
From: _____ To: _____

Number of Persons on Site _____ Number of Vehicles: _____

Recommended Staffing Security: _____ Maintenance _____

Special Instructions: _____

Use reverse side for any additional instructions:

Shaded areas to be completed by County Staff.

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Roads

Roads to be Used: _____

Specific Section to be Used: _____

Dates/Hours of Use: From: _____ To: _____
From: _____ To: _____

Additional Special Instructions: _____

Permittee agrees to comply to applicable laws and to maintain the premises in good condition and return premises in the same condition as before use.

Unless greater or lesser coverage is requested, Permittee agrees to furnish the County of San Diego with evidence of at least \$1million comprehensive general liability insurance, including the contractual liability and automobile liability when applicable, in the form of a certificate, covering the entire period of the permit, naming the County of San Diego as additional insured. Permittee waives all claims against the County of San Diego, its officers, agents and employees, for fees or damage caused by, arising out of, or in any way connected with the exercise of this permit and Permittee agrees to save harmless, and indemnify and defend the County of San Diego, its officers, agents and employees caused by, arising out of, or in any way connected with exercise by Permittee of the rights hereby permitted, except those arising out of the sole negligence of the County.

| | | |
|----------------------------|--------------------------|-------------------|
| _____ Insurance Company | _____ Expiration Date | _____ Policy # |
|----------------------------|--------------------------|-------------------|

Insurance Confirmed: _____

Permittee agrees to all terms and conditions of this permit application form including provisions in attachments.

Film Company Representative:

| | |
|---------------|----------------|
| _____ Name | _____ Title |
|---------------|----------------|

County Representative:

| | |
|---------------|----------------|
| _____ Name | _____ Title |
|---------------|----------------|

Please mail or fax to:
SYLVIA BUGIEL
San Diego County Parks and Recreation
9150 Chesapeake Dr., Suite 200
San Diego, CA 92123
Phone: (858) 966-1308 Fax: (858) 495-5841